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CONFIRMATION NO. 7345

<b>SERIAL NUMBER</b> 10/629,007	<b>FILING OR 371(c) DATE</b> 07/29/2003 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3731	<b>ATTORNEY DOCKET NO.</b> 37841.1.5
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/115,446 04/02/2002 ABN which is a CON of 09/162,036 09/28/1998 PAT 6,368,326

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

UNITED STATES OF AMERICA PCT/US99/22387 09/27/1999

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

10/24/2003

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 26	<b>TOTAL CLAIMS</b> 60	<b>INDEPENDENT CLAIMS</b> 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>J. M. Miller</i> Initials				

**ADDRESS**

22859

**TITLE**

Internal cord fixation device

<b>FILING FEE RECEIVED</b> 1010	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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